IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

BYRON VENCENT BELL et al.

Examiner: Michael S. Brooke

Ser. No.

Group Art Unit: 2853

For:

HEATER CHIP CONFIGURATION FOR INKJET PRINTHEAD AND

PRINTER

DECLARATION

Commissioner of Patents and Trademarks P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Attached please find a declaration for parent application (Serial No. 10/146,578 filed on May 14, 2002, Attorney docket 2001-0699.01) that Applicant herewith submits for the concurrently filed continuation application (Attorney docket 2001-0699.07).

Respectfully Submitted,

KING & SCHJEKLI, PLLC

Michael T. Sanderson Registration No. 43,082

247 North Broadway Lexington, Kentucky 40507 (859) 252-0889

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed

to: Commissioner of Patents and Trademarks, P.O. Box 1450, Alexandria, VA 22313-1450, on

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DECLARATION FOR UTILITY OR

DESIGN

2001-0699.01

Bell, Byron Vencent

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
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Attorney Docket Number

First Named Inventor

(37 CFR 1.63)		COMPLETE IF KNOWN							
		Application Number							
X Declaration	Declaration	Filing Date							
Submitted OR	Submitted after Initial Filing (surcharge	Art Unit							
with Initial Filing	(37 CFR 1.16 (e)) required)	Examiner Name							
As the below named inventor, I hereby declare that:									
My residence, mailing address, and citizenship are as stated below next to my name.									
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
	Chip Configuration I								
	F a arri-Sammiron I	:	mid i iiib						
(Title of the Investigat)									
(Title of the Invention) the specification of which									
X is attached hereto									
' OR C									
was filed on (MM/DD/YYYY)		se United States A	Innlication Number	or PCT International					
as United States Application Number or PCT International									
Application Number	and was amend	ed on (MM/DD/YYYY)		(if applicable).					
				(ii dippledois).					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(2)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certifled Copy Attached? YES NO					

[Page 1 of 2]

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will very depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: X Customer Nu or Bar Code	1	21	972		OR		Corre	espondence address below
Name								
Address								
City			State	······································				ZIP
Country	Telepho	one						Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]) Byron Vencent Family Name or Surname Bell								
Inventor's Ayron Mercant Bell Date 5/9/02							Date 5/9/02	
<i>y</i>								
Residence: City Paris	SI	ate KY		Count	ry US			Citizenship US
Mailing Address 741 Collins Road								
city Paris	St	ate KY		ZIP 4	0361			Country US
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]) Robert Wilson Family Name or Surname Cornel]								
Inventor's Signature Signature Circle Date				5/9/2002.				
Residence: City Lexington	St	ate KY		Count	ry U	<u>S</u>		Citizenship US
4173 Palmetto Drive								
Mailing Address							 -	
							1	
City Lexington		ate KY		ZIP 4(Country US
X Additional inventors are being named on the1_supplemental Additional Inventor(s) sheat(s) PTO/SB/02A attached hereto.								

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page ___ of ___

Name of Additional Joint Inventor, If any: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])			Family Name or Surname				
Yimin Guan							
Inventor's Signature Date 5-9.0							
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Mailing Address							
City Lexington	State KY		ZIP 40513 Count		y US		
Name of Additional Joint Inventor, if any: A petition has been filled for this unsigned inventor							
Given Name (first and middle [if any])			Family Name or Surname				
inventor's Signature				Date			
Residence: City	State		Country		Citizenship		
Mailing Address							
Mailing Address					ountry		
City	State		ZIP) Ço	undy		
Name of Additional Joint Inventor, if any: A patition has been filed for this unsigned inventor							
Given Name (first and middle [if any])			Family Name or Surname				
Inventor's Signature					Date		
Residence: City	State		Country		Citizenship		
Mailing Address							
Mailing Address							
City	State		ZIP	c	ountry		

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